FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

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OMB APPR	OVAL
OMB Number:	3235-0076
Expires:	
Estimated average	je burden
hours per respons	se 16.00

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		l

UNIFOR	M LIMITED OFFERING EXEM.	PITON
Name of Offering (check if this is an amendmen	t and name has changed, and indicate change.)	S. C.
Filing Under (Check box(es) that apply):	504 Rule 505 Rule 506 Section 4(6)	TOULOE-CEIVED C
	A. BASIC IDENTIFICATION DATA	3 2000 W
Enter the information requested about the issuer		
Name of Issuer (check if this is an amendment at The Counter Santana Row, LP	nd name has changed, and indicate change.)	E 273 SECTION
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2039 Seabrook Court Redwood City CA 94065	(Humber and Sheet, City, State, 21p Code)	650-654-8900
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
Franchise restaurant	r	
	partnership, already formed other (partnership, to be formed	please specify):
Actual or Estimated Date of Incorporation or Organiza Jurisdiction of Incorporation or Organization: (Enter CN f		mated THOMEON FINE
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of securi 77d(6).	ties in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 and Exchange Commission (SEC) on the earlier of the which it is due, on the date it was mailed by United St	date it is received by the SEC at the address given b	
Where To File: U.S. Securities and Exchange Commi	ssion, 450 Fifth Street, N.W., Washington, D.C. 20	9549.
Copies Required: Five (5) copies of this notice must be photocopies of the manually signed copy or bear typed		ly signed. Any copies not manually signed must be
Information Required: A new filing must contain all is thereto, the information requested in Part C, and any man not be filed with the SEC.	•	• • •
Filing Fee: There is no federal filing fee.		
State:		
This notice shall be used to indicate reliance on the UULOE and that have adopted this form. Issuers rely	,	

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

this notice and must be completed.

filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	✓ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Peter A. Katz (Manager	of General Partr	er, Counter Intelligend	ce LLC)		
Business or Residence Addre 2039 Seabrook Court Re		_	ode)		
Check Box(es) that Apply:		Beneficial Owner	Executive Officer	☐ Director	✓ General and/or Managing Partner
Full Name (Last name first, i	f individual)			· · · · · · · · · · · · · · · · · · ·	
George Haymaker III (Ma	anager of Gener	al Partner, Counter Int	elligence LLC)		
Business or Residence Addre 2039 Seabrook Court Red		• • • • •	ode)		
Check Box(es) that Apply:	✓ Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Andrew Katz (Manager o		er, Counter Intelligence	e LLC)		
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
2039 Seabrook Court Re	dwood City CA	94065			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				,
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Address	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				,
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip C	ode)		
	(Utachia	nk sheet or conv and use	- 4 4 iai 1 i 6 ali	1 -1 -1	

	Section 1				B. II	VFORMATI	ON ABOU	T OFFERI	٧G		Projection (
												Yes	No		
1.	· · · · · · · · · · · · · · · · · · ·						•••••		X						
	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?							₅ 50 (000.00						
2.	What is	the minim	um investn	ent that w	ill be acce	pted from a	iny individ	ual?			••••••				
3.	Does th	e offering	permit joint	t ownershi	p of a sing	le unit?						Yes	No K		
4.					•					•	irectly, any				
											he offering. with a state				
	or states	s, list the na	me of the b	roker or de	aler. If mo	ore than five	e (5) persor	ns to be list	ed are asso		ons of such				
	_		you may s		informati	on for that	broker or	dealer only	·						
	II Name (! one	Last name	first, if indi	ividual)											
Bu	siness or	Residence	Address (N	umber and	l Street, Ci	ity, State, Z	ip Code)								
Na	me of Ass	sociated Br	oker or De	aler											
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers								
	(Check	"All States	or check	individual	States)							☐ Al	1 States		
	AL	ĀK	AZ	AR	CA	CO	[CT]	DE	DC	FL	GA	HI	ID		
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO		
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA		
	RI	SC	SD	TN	TX	UT	VT	[VA]	WA	WV	WI	WY	PR		
Ful	ll Name (Last name	first, if ind	ividual)					- 1 <u> </u>				<u> </u>		
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State, 2	Zip Code)				-				
17		I D.		-1			<u></u>								
Na	me of As	sociated Bi	oker or De	ater											
Sta	tes in Wh	nich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers								
	(Check	"All States	or check	individual	States)						***************************************	☐ Al	1 States		
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD		
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO		
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA		
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	\overline{WY}	PR		
Ful	ll Name (Last name	first, if ind	ividual)											
_											-		···		
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)	÷							
Na	me of As	sociated Br	oker or De	aler											
Sta	ites in Wh	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers								
	(Check	"All States	s" or check	individual	States)			•••••					1 States		
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪD		
	IL	ĪN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO		
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA		
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	\overline{WY}	PR		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount alrea sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, che this box \square and indicate in the columns below the amounts of the securities offered for exchange a	ck	
	already exchanged.	A	A A lance de .
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$ 800,000.00	\$ 800,000.00
	Other (Specify)		\$
	Total		\$ 800,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in the offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "0" if answer is "none" or "zero."	ate	
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	6	\$_800,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$ 800,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securit sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1	the	
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504	Limited pshp	\$ 800,000.00
	Total		\$ 800,000.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of a securities in this offering. Exclude amounts relating solely to organization expenses of the insurunce information may be given as subject to future contingencies. If the amount of an expenditure not known, furnish an estimate and check the box to the left of the estimate.	er.	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	<u>.</u>	\$_100.00
	Legal Fees	 -	2 000 00
	Accounting Fees	_	500.00
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)		\$
	Total		\$ 3,600.00

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. This difference is the "adjusted g	ross	\$
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total oproceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate f the payments listed must equal the adjusted g	and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🗀 \$	\$ 12,000.00
	Purchase of real estate		🔲 \$	\$
	Purchase, rental or leasing and installation of mand equipment		🗀 \$	\$ 325,890.00
	Construction or leasing of plant buildings and fac	cilities	🗀 \$	9,202.00
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass issuer pursuant to a merger)	ets or securities of another	[] \$	253,089.00
	Repayment of indebtedness		🗀 \$	_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Working capital			
	Other (specify): Miscellaneous buildout costs-	See attached "Use of Proceeds" detail	[] \$	156,219.00
			 	\$
	Column Totals			\$ 796,400.00
	Total Payments Listed (column totals added)		\(\s\ \frac{7}{2}	96,400.00
		D. FEDERAL SIGNATURE		
sig	issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furnished by the issuer to any non-accordance.	rnish to the U.S. Securities and Exchange Cor	nmission, upon writte	
	uer (Print or Type) e Counter Santana Row, LP	Signature (Date	
	ne of Signer (Print or Type)	Title of Signer (Print or Type)	190100	
	er E. Katz	Manager of Counter Intelligence, LLC, its	General Partner	
	7 L. NQL	manager of Counter Intelligence, LEC, its	Ocheral Fatther	

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

Appendix F

Use of Proceeds

	Santana		
• Expense	Row	Comments	-
Franchise Fee	30,000	Reimburse fee prepaid by Regional Directors	-
Attorneys Fee	8,000		_
Accountant Fee	1,000		
ncorporation Fee	1,039	Palo Alto actuals	_
Real Estate Commission		None	_
Security Deposit	9,202	One month rent (base?)	
SBA Loan Fee Deposit	-	No loan	_
SBA Closing Costs	-	No Ipan	
Architect Fee	15,700		٦
Plan Check Fee	2,850	Expediter Fees	
ocal Architect/Const. Mgr. Fee	-		
Engineer Fees	-	Included in architect	
Structural Engineer Fee	-	Included in architect	
icense & Permits	4,385	Palo Alto actuals	_
Liquor License	50,000	Full License thru third party	
Business License		Not required in Palo Alto	
Health Permit	1,544		
Dept Equalization Sellers Deposit	-	Nane required for PAO	
nsurance - Construction	2,508	Course of construction and liability	
nsurance-Workers Comp	1,043	Should run 7% of payroll or approx.	
nsurance- Property	1,860	Package	
Site Development/Construction	312,801	Palo Alto actuals	
nfrastructure est. delta to Palo Alto	140,000	Demolition, electrical, HVAC, Hood venting	
Site Contingency Overrun	31,696	7% of last two lines (safety net)	
Tenant Improvement Contribution	(184,050)	Per Santana Row LOI	
Restaurant Equipment	111,759	winstall	
Millwork	-	Inc in SiteDev - Front Counter and Beverage	
Outdoor Furniture/Heaters	12,000	Two patios	
Restaurant Furniture/Fixtures	27,773	Tables, chairs, bankettes	
Computer Equipment/POS	36,076		
Signage/Décor (Menu Boards)	13,981	Palo Alto actuals	
Security Alarm System	1,500	 	_
Audia & Video System	7,500	Plasma and Stereo receiver	
Surveillance System	2,500		_
Fire Sprinkler System		Provided by Landlord	_
Grease Interceptor	50,000		
Lighting Package		In GC bid	
Smallwares & Supply	8,000		
Open Business Checking Acct	200		_
Start Up Office Supplies	300		
Telephone	500	If required	—
Utility Deposit	500	If required	
Safe	500		
FIII Safe and Tills	2,000		
Initial Rent Payment	15,000	Mana	_
Initial Loan Payment	2000	None	
New Store Opening Kit	2,000	implication CM for C wooden	
Pre-Opening Training/Labor	12,000		نــــ
Home Office Training	2,000	Expenses only	
nitial Inventory	10,000	Detail inventory incl	
Uniforms	2,500		
Pre-Opening Advertising	241	Mostly reproduction and foot labor costs	
Grand Opening Expense	2,500	Advertising only First few months negative cash flow	-
alest ine Capital			
Working Capital	40,000	First lew months negative cash now	-
Working Capital Miscellaneous Items	2,000	First (Sw mounts regarive cash now	